PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

Certificate of Mailing or Transmission y certify that this Fee(s) Transmittal is being deposited with the Universal Service with sufficient postage for first class mail in an enveloped to the Mail Stop ISSUE FEE address above, or being facsing tted to the USPTO (703) 746-4000, on the date indicated below.	papers. Each addition have its own certificate to the I hereby certify that to the Matransmitted to the USI	MAR 0 4 2005 B	NTHROP, LLP	O. BOX 10500 CLEAN, VA 221
(Depositor's nar	7	Linn.)17 077 <u>2</u> 12 0721071	MBEYENES 000000
(Signato		TRADEMARK		1400.00 D 12.00 D
ATTORNEY DOCKET NO. CONFIRMATION NO.	IED INVENTOR		FILING DATE	PLICATION NO.
P 268412 DM-3580 5363	d P. Lesser	Ronald	10/19/2000	09/691,051
ON FEE TOTAL FEE(S) DUE DATE DUE \$1370 1460 03/07/2005	PUBLICATION FEE \$0	ISSUE FEE \$1270 1400	SMALL ENTITY NO	APPLN. TYPE
				•
	CLASS-SUBCLASS 607-003000	3762		OROPEZA, F
FILLSDULY WINGILD	rinting on the patent front page, I	(1) the na	Change of correspondence address or indication of "Fee Address" (37 R 1.363).	
or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to		Correspondence or agents (2) the na registerec of a Customer 2 register	lence address (or Change of 22) attached. ion (or "Fee Address" Indic or more recent) attached. Us	lress form PTO/SB/12 'Fee Address" indicati
	NT (print or type)	E PRINTED ON THE PATEN	RESIDENCE DATA TO E	IGNEE NAME AND
nt. If an assignee is identified below, the document has been filed ignment.	ppear on the patent. If an assig te for filing an assignment.	clow, no assignee data will apport this form is NOT a substitute	an assignee is identified b 37 CFR 3.11. Completion	EASE NOTE: Unless ordation as set forth in
TATE OR COUNTRY)	NCE: (CITY and STATE OR CO	(B) RESIDEN	EE	NAME OF ASSIGNE
ryland	imore, Maryland	ty Balti	pkins Universi	he Johns Ho
dividual 🛮 Corporation or other private group entity 🚨 Governm	e patent) : 🔲 Individual 🖾 (ries (will not be printed on the	assignee category or category	check the appropriate
	` '	4b. Payment of	enclosed:	following fee(s) are
Vraer No. 41061/268	ck in the amount of the fee(s) is e			ssue Fee
form PTO-2038 is attached.	ent by credit card. Form PTO-203 pirector is hereby authorized by ccount Number	,	mall entity discount permitte	Publication Fee (No sr Advance Order - # of

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

March 4, 2005 **Authorized Signature** 39,328 Typed or printed name Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.